

BID/RFP RECEIPT

Receipt of Bid/RFP Proposal No. 50-129904

From: Orme Lock Co.

Company's Name

Person Received Bid: R. Hershman

Number of Envelopes/Boxes Received: tenvelope

Jefferson Parish Purchasing Department

1221 Elmwood Park Blvd.

Suite 404 – Yenni Bldg.

Jefferson, LA 70121

Due: 2/28/2020
At: 11:00 AM
Mark

2020 FEB 27 AM 10:56

FOR
MARK

Bid no 50-00129964

Aeme Lock CO

DATE: 2/18/2020

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00129964

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETNA, LA. 70054-0009
504-364-2678

VENDOR: Acme Lock co

BUYER: MBUTTERY

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

DELIVERY: FOB JEFFERSON PARISH	
INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES	<u>4 weeks</u>
INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>30 Days</u>
INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>2 Days</u>

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____
NUMBER: _____
NUMBER: _____
NUMBER: _____

Locksmith

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) FS9

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: <u>Acme Lock co</u>	
SIGNATURE: (Must be signed here) <u>Nina M. Rojas</u>	TITLE: <u>Gm</u>
PRINT OR TYPE NAME: <u>NINA M. ROJAS</u>	
ADDRESS: <u>265 Jules Ave</u>	
CITY, STATE: <u>Jefferson La</u>	ZIP: <u>70121</u>
TELEPHONE: <u>(504) 831-0008</u>	FAX: <u>(504) 831-8866</u>
EMAIL ADDRESS:	

TOTAL PRICE OF ALL BID ITEMS: \$ 1,412.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00129964

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>LABOR, MATERIALS AND EQUIPMENT NECESSARY TO PROVIDE AND INSTALL NEW CORES AND KEYS AT TWO (2) PUMP STATIONS FOR THE DEPARTMENT OF DRAINAGE</p> <p>0010 - LABOR AND MATERIALS TO INSTALL (4) BEST HOUSINGS AND (4) CORES KEYED TO PS-11-1 W/ (4) KEYS</p> <p>*SERVICE LOCATION* COUSINS #2 PUMP STATION 2466 DESTREHAN BLVD HARVEY LA 70058</p> <p>CONTACT: JAMAL SINGLETON 504-453-9395 JSINGLETON@JEFFPARISH.NET</p>	<p>\$916.⁰⁰</p>	<p>\$916.⁰⁰</p>
2	1.00	JOB	<p>0020 - LABOR AND MATERIALS TO INSTALL (2) CORES W/ KEYS KEYED TO PS-16-1</p> <p>*SERVICE LOCATION* BAYOU SEGNETTE #1 PUMP STATION 801 LOUISIANA STREET WESTWEGO LA 70094</p> <p>CONTACT: JAMAL SINGLETON 504-453-9395 JSINGLETON@JEFFPARISH.NET</p>	<p>\$496.⁰⁰</p>	<p>\$496.⁰⁰</p>



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/23/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER SUSAN PRICE GEOGHEGAN 6601 VETERANS MEMORIAL BLVD. SUITE 17 METAIRIE, LA 70003	CONTACT NAME: GREG BEAUMONT PHONE (A/C, No, Ext): 504-883-5553 E-MAIL ADDRESS: GREG@SF247.NET FAX (A/C, No): 504-883-5578													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : STATE FARM INSURANCE COMPANIES</td> <td>25143</td> </tr> <tr> <td>INSURER B : LWCC</td> <td>22350</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : STATE FARM INSURANCE COMPANIES	25143	INSURER B : LWCC	22350	INSURER C :		INSURER D :		INSURER E :		INSURER F :
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INSURED ACME LOCK COMPANY INC 265 JULES AVE JEFFERSON LA 70121-2820														

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Y	Y	98-EZ-3591-9	11/15/2012	11/15/2020	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 4,000,000
							PRODUCTS - COMP/OP AGG	\$ 4,000,000
								\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	125-2173-E15-18D	11/15/2012	11/15/2020	COMBINED SINGLE LIMIT (Ea accident)	\$ 500,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y	Y	98-BM-E953-5	12/16/2013	12/16/2020	EACH OCCURRENCE	\$ 3,000,000
							AGGREGATE	\$ 3,000,000
								\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	147455	05/01/2014	05/01/2020	WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

THE PARISH OF JEFFERSON, ITS DISTRICTS, DEPARTMENTS, AND AGENCIES, UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCIL

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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